

Political Organization  
Notice of Section 527 Status

OMB No. 1545-1693

**Part I** General Information

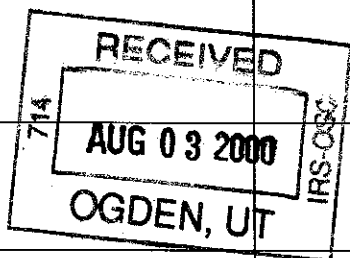
1 Name of organization FTA PAC, Inc.		Employer identification number 59 2882065
2 Mailing address (P.O. Box or number, street, and room or suite number) 350 East College Avenue		
City or town, state, and ZIP code Tallahassee, FL 32301		
3 E-mail address of organization fl@truckline.com		
4a Name of custodian of records Charles J. Brantley	4b Custodian's address 350 East College Avenue Tallahassee, FL 32301	
5a Name of contact person Bonnie White	5b Contact person's address 350 East College Avenue Tallahassee, FL 32301	
6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number		
City or town, state, and ZIP code		

**Part II** Purpose

7 Describe the purpose of the organization  
Lobbying for the trucking industry (State of Florida ONLY)

**Part III** List of All Related Entities (see instructions)

8a Name of related entity	8b Relationship	8c Address
N/A		



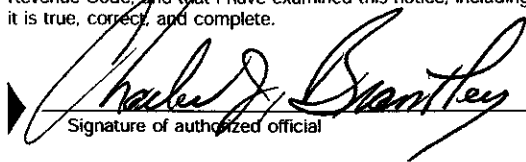
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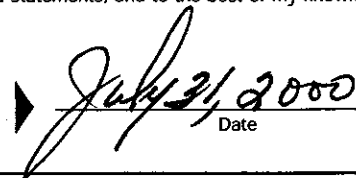
**Part IV** List of All Officers, Directors, and Highly Compensated Employees (see instructions)

9a Name	9b Title	9c Address
Guy Bostick	Chairman	P.O. Box 67 Auburndale, FL 33823-0067
Sidney Alterman	Vice Chairman	12805 N.W. 42nd Avenue Opa Locka, FL 33054-0425
Gene Fogarty	Director	P.O. Box 3402 Tampa, FL 33601-3402
Charlie Brown	Director	2200 West Landstreet Road Orlando, FL 32809-7900
Tommy Oakley	Director	P.O. Box 4170 Lake Wales, FL 33859-4170
Marvin Pritchett	Director	P.O. Box 311 Lake Butler, FL 32054-0311
Charles Brantley	Secretary/ Treasurer	350 East College Avenue Tallahassee, FL 32301

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

**Sign  
Here**

  
Signature of authorized official

  
Date

